

Leasing Worksheet

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Funding: Fax: 203.301.2928

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Full Legal Name: CITY OF MINOT				Phone: (701) 857-4771								
Install Address (No P.O. Box): 515 2nd AVE SW	City:						State: Zip Code ND 58701					
Product Description			Model Numl		aler Stock	Quad	lient	Quadient	Qty	List Price	Se	elling Price
3 Station Expert 2 Auto Fdr + Auto BF	(Me	eter Only)	Billing		Billing QL		\$11,547.0		S11,547.00			
+ Multi License				J		· 						
										\$11,547.0	U Þ	311,547.00
☐ ACH Lease Payments	Trade-U	Jp Lease	#:± <u>N1810</u> 2	2564		L	ist Pri	ice Total:			\$1	11,547.00
☐ Multi-Level Lease	Dricing.	Type: N/	ASPO Compe	otitivo		-	Disco	ount:				\$0.00
LTOP		Type. IV	ASPO Compo	∃แแv o		+	Trade	e-up Cost:				\$1.00
Split Order	POC #	0.0	· - =			+	Ship	ping & Hand	dling:			\$0.00
involor / ppo. Or 10							+ Install/Other Fee:					\$0.00
☐ Debit Doc Fee from Funding		NeoShip:						+ Doc Fee: *				\$0.00
	Promos:						+ 3rd Party Buyout:					\$0.00
	I					+	Upfro	ont SalesTa	ax (IL/N	J/ME): **		\$0.00
								n Payment:		\$0.00		
						C	Choose	e Billing Fre	equenc	y:		Quarterly
								Financed Lease Cost:				
								Monthly Lease Rate (NASPO):				
						N	Month	ly Lease Pa	ayment	t:		\$292.16
Number of Meter Rental & iMeter Apps Hardware Maint. First 48 \$0.00 \$134.25	Software Sub- scription \$0.00	Software Support	Depot Repair (NUSA Other)	myNeopo Sub- scription \$0.0	Sub- scriptio	n Fin	ease apt anced	Lease Water Financed	Leas Eqp Tota \$292	ot Period al Paym	dic ent	Total Periodic Bund. Pmt \$1,279.23

MASTER LEASE #, if applicable:

- ± The old lease number must be included, otherwise the old lease will not terminate, and the customer will be double billed.
- * Doc Fee: If you would like the Doc fee deducted from funding, it must be included in this leasing worksheet and included in the Lease Cost.
- $\ensuremath{^{**}}$ Upfront tax is required and only available in IL,ME,NJ.

Be sure to indicate the postage payment option on the lease agreement (blanks will default to prepay option and Quadient Postage Funding).

For existing POC customers, please indicate if you want to link the meter to the existing POC account (recommended). Please include the account number.

For new POC accounts, if Prepay is selected, submit a copy of first postage check payable to USPS. If ACH Debit is selected, submit a copy of the signed ACH Form for set-up.